MDSS

Monitoring And Decision Support Services

A STUDY OF THE PAYMENT STATUS OF ADULT CLIENTS AT RHODE ISLAND COMMUNITY MENTAL HEALTH CENTERS, 2000–2005

INTRODUCTION

The Rhode Island Division of Behavioral Healthcare conducts periodic studies examining the "expected payment source" for adult clients of the Community Mental Health Centers for purposes of planning and system analysis. These studies have allowed the Division to make projections of service utilization; estimate the potential costs and benefits associated with various Medicaid coverage configurations; and assess the penetration of the Mental Health Medicaid Program in our target populations.

This brief analysis is based on five studies conducted over the period November 2000—September 2005.

BACKGROUND

The introduction of the Community Mental Health Medicaid Program in 1987 marked the beginning of a period of intense growth in the percentage of CMHC clients who are Medicaid eligible. For example, in 1986, only 22% of the CMHCs' adult clients were covered by Medicaid. This figure grew to 34% just three years later in 1989, reached 59% in 2000, and has remained stable at approximately 66—67% for the last several years. This is in large part due to the fact that the availability of Medicaid funding for needed services provided the impetus for community agencies to ensure that all eligible clients receive the benefits to which they are entitled.

In the past, the data for this study was gathered by DBH using a survey instrument completed by all CMHCs, based on client payment status as captured by their in-house billing systems. However, the 2005 data was drawn from the MHSIP Client Database which, due to the efforts of the Division and the provider community, has developed to the point that it can provide reliable data in this area.

It is also important to note also that there as of 9/30/05, there were also 223 adults with severe and persistent mental illness being served by the state's three non-CMHC mental health providers, i.e. North American Family Institute, Fellowship Health Resources, and Riverwood Rehabilitation. These individuals are not accounted for in this report unless they are also enrolled at a CMHC. This group is approximately 96% Medicaid-eligible.

RESULTS

The statewide adult CMHC census was 10,517 in Setember of 2005 as compared to 10,378 in December, 2004, an increase of 139 total clients, 81 CSP and 58 GOP (Figure 1).

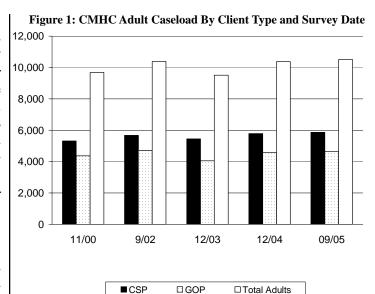


Figure 2: Percentage of Total CMHC Caseload By Client Type and

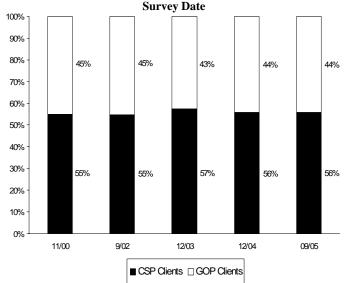
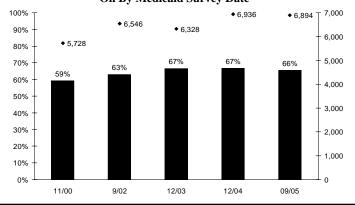


Figure 3: Percentage/Number of CMHC Clients
On By Medicaid Survey Date



Overall, the breakdown between client types remained the same as last year, i.e. 56% CSP and 44% GOP (Figure 2).

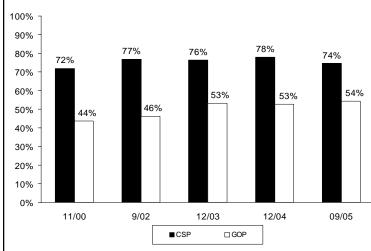
It is important to note that the term 'census' as used in this report refers to a static count of individuals in service at a specific point in time. This term should not be confused with 'clients served' which is a measure of the throughput of the system over a defined time period.

As shown in Figure 3, the percentage of the overall CMHC census represented by Medicaid clients dropped slightly, going from 67% in 2004 to 66% in 2005. There was a corresponding small decrease in the absolute number of clients receiving Medicaid over that same period, i.e. 6,936 to 6,894. Thus, the system is still in the position to be severely impacted by even a small change in Medicaid benefits or eligibility.

The percentage of total CSP clients receiving Medicaid dropped slightly to 74% in 2005, down 4% from the 2004 level, while the percentage of total GOP clients receiving Medicaid increased by 1% to 54%. (Figure 4). These figures are in sharp contrast to the 1986 baseline data used for this series of reports in which just 39% of CSP clients and 9% of GOP clients were covered.

Figures 5 and 6 show the breakout of the 09/05 census by client type and funding source. Individual providers may wish to use these figures to assess the composition of their caseload

Figure 4: Percentage of Total CSP and Total GOP Clients
Receiving Medicaid



in relation to the state as a whole.

Figure 5: CSP Clients By Payment Source 2005

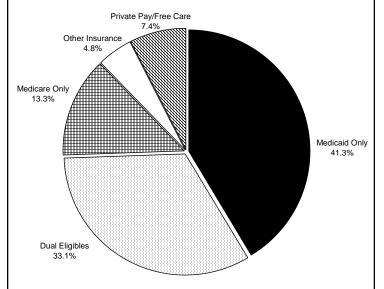
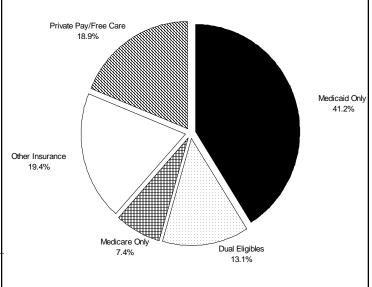


Figure 6: GOP Clients By Payment Source 2005



Additional copies of this report are available on request from:

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This office of partially funded by a Data Infrastructure Grant from the Center for Mental Health Services.